Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

CD-ROM or CD-R?:: None

Sequence Submission:: Paper

Computer Readable Form (CRF)?:: Yes

Number of Copies of CRF:: 1

Title:: IMMUNODIAGNOSTIC DETERMINATION OF

USHER SYNDROME TYPE IIA

Attorney Docket Number:: 249.0002 0101

Request for Early Publication?:: No

Request for Non-Publication?:: No

Total Drawing Sheets:: 9

Small Entity?:: Yes

Petition Included?:: No

Licensed US Govt. Agency:: US Dept of Heath and Human Services

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Contract or Grant Numbers:: Grant No. RTC P60 DC00982

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Dominic

Middle Name:: E.

Family Name:: COSGROVE

Name Suffix:: Ph.D.
City of Residence:: Omaha

State or Province of Residence::	NE
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Country of Residence:: US

Street of Mailing Address:: 5612 Howard Street

City of Mailing Address:: Omaha

State or Provence of Mailing Address:: NE

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 68106

Correspondence Information

Correspondence Customer Number:: 26813

Phone Number:: 612/305-1217

Fax Number:: 612/305-1228

E-Mail Address:: amueting@mrgs.com

Representative Information

Representative Customer Number::	26813	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/237,834	10/03/00

Assignee Information

Assignee Name:: BOYSTOWN NATIONAL RESEARCH HOSPITAL

Street of Mailing Address:: 555 North 30th Street

City of Mailing Address:: Omaha

State or Province of Mailing Address:: NE

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 68131